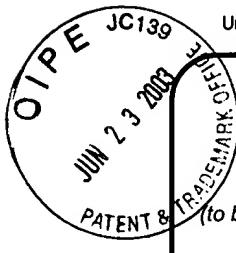


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Approved for use through 10/31/2002. OMB 0651-0031

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Total Number of Pages in This Submission

Application Number 09/456,127

Filing Date 12/07/1999

First Named Inventor Andrew Baird et al.

Group Art Unit 2174

Examiner Name S. P. Sax

Attorney Docket Number 003797.80027

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ENCLOSURES (check all that apply)

 Fee Transmittal Form Assignment Papers
(for an Application) After Allowance Communication to Group Fee Attached Drawing(s) Appeal Communication to Board of Appeals and Interferences Amendment / Response Licensing-related Papers Appeal Communication to Group
(Appeal Notice, Brief, Reply Brief) After Final Petition Proprietary Information Affidavits/declaration(s) Petition to Convert to a Provisional Application Status Letter Extension of Time Request Power of Attorney, Revocation Change of Correspondence Address
 Other Enclosure(s)
(please identify below):

 4 PTO 1449 Forms; 63 U.S. patents; 1 published application; 3 foreign patent documents; 7 non-patent documents; Search Report for PCT/US 01/19919 on October 5, 2001; and Search Report for PCT/US 00/33082 on February 15, 2001
 Express Abandonment Request Terminal Disclaimer Information Disclosure Statement Request for Refund CD, Number of CD(s) _____

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name

Gary D. Fedorochko, Reg. No. 35,509

Signature

Date

June 23, 2003

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:

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FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27
TOTAL AMOUNT OF PAYMENT (\$) **180.00**

Complete if KnownApplication Number **09/456,127**Filing Date **12/07/1999**First Named Inventor **Andrew Baird et al.**Examiner Name **S. P. Sax**Art Unit **2174**Attorney Docket No. **003797.80027**

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METHOD OF PAYMENT (check all that apply)

Check Credit card Money Other None
 Order

Deposit Account:Deposit Account Number **19-0733**Deposit Account Name **Banner & Witcoff, Ltd.**

The Commissioner is authorized to: (check all that apply)
 Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION**1. BASIC FILING FEE**

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee Code	Fee (\$)	Fee (\$)
1001	2001	750	375
1002	2002	330	165
1003	2003	520	260
1004	2004	750	375
1005	2005	160	80
SUBTOTAL (1)		(\$ 0)	

2. EXTRA CLAIM FEES

Total Claims	- **	=	Extra Claims	X	Fee from below	=	Fee Paid
Independent Claims	- **	=		X		=	
Multiple Dependent				X		=	0

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee Code	Fee (\$)	Fee (\$)
1202	2202	18	9
1201	2201	84	42
1203	2203	280	140
1204	2204	84	42
1205	2205	18	9
SUBTOTAL (2)		(\$)	

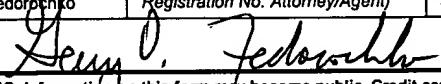
** or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee Code	Fee (\$)	Fee (\$)
1051	2051	130	65
1052	2052	50	25
1053	1053	130	130
1812	1812	2,520	2,520
1804	1804	920*	920*
1805	1805	1,840*	1,840*
1251	2251	110	55
1252	2252	410	205
1253	2253	930	465
1254	2254	1,450	725
1255	2255	1,970	985
1401	2401	320	160
1402	2402	320	160
1403	2403	280	140
1451	1451	1,510	1,510
1452	2452	110	55
1453	2453	1,300	650
1501	2501	1,300	650
1502	2502	470	235
1503	2503	630	315
1460	1460	130	130
1807	1807	50	50
1806	1806	180	180
8021	8021	40	40
1809	2809	750	375
1810	2810	750	375
1801	2801	750	375
1802	1802	900	900
Other fee (specify) _____			

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)**(\$ 180.00)****SUBMITTED BY****Complete (if applicable)**

Name (Print/Type)	Gary D. Fedoroshko	Registration No. Attorney/Agent)	35,509	Telephone	(202) 824-3000
Signature				Date	June 23, 2003

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